


FORM 10. PROOF OF CLAIM

United States Bankruptcy Court Southern District of Texas		Proof of Claim	
In re (Name of Debtor) STAGE STORES INC 76 0107711		Case Number 00 35078 H2 11	
NOTE: This form should not be used to make a claim for an administrative expense arising after the commencement of the case. A request for payment of an administrative expense may be filed pursuant to 11 U.S.C. § 503.			
Name of Creditor <i>(The persons or other entity to whom the debtor owes money or property)</i> ENERGAS GAS COMPANY A Division of Atmos Energy Corporation		<input type="checkbox"/> Check box if you are aware that anyone else has filled a proof of claim relating to your claim. Attach copy of statement giving particulars. <input type="checkbox"/> Check box if you have never received any notices from the bankruptcy court in this case. <input checked="" type="checkbox"/> Check box if this address differs from the address on the envelope sent to you by the court.	
Name and Address Where Notices Should be Sent Jeff Perryman, Legal Assistant Atmos Energy Corporation P. O. Box 650205 Dallas, TX 75265-0205 Telephone No.: 972 855 3736		UNITED STATES COURTS SOUTHERN DISTRICT OF TEXAS FILED AUG 02 2000 EC Michael N. Milby, Clerk	
ACCOUNT OR OTHER NUMBER BY WHICH CREDITOR IDENTIFIES DEBTOR: 564974 / 676984			
1. BASIS FOR CLAIM <input checked="" type="checkbox"/> Goods Sold - NATURAL GAS <input type="checkbox"/> Services Performed <input type="checkbox"/> Money Loaned <input type="checkbox"/> Personal Injury/Wrongful Death <input type="checkbox"/> Taxes <input type="checkbox"/> Other (Describe briefly) <div style="margin-left: 300px;"> <input type="checkbox"/> Retiree benefits as defined in 11 U.S.C. § 1114(a) <input type="checkbox"/> Wages, salaries, and compensation (Fill out below) Your social security number _____ Unpaid compensation for services performed from _____ to _____ <div style="display: flex; justify-content: space-between; width: 100%;"> (date) (date) </div> </div>			
2. DATE DEBT WAS INCURRED: 2-18-1991 THROUGH 6-1-2000		3. IF COURT JUDGMENT, DATE OBTAINED:	
4. CLASSIFICATION OF CLAIM. Under the Bankruptcy code all claims are classified as one or more of the following: (1) Unsecured nonpriority, (2) Unsecured Priority, (3) Secured. It is possible for part of a claim to be in one category and part in another. CHECK THE APPROPRIATE BOX OR BOXES that best describe your claim and STATE THE AMOUNT OF THE CLAIM AT TIME CASE FILED.			
<input type="checkbox"/> SECURED CLAIM \$ _____ Attach evidence of perfection of security interest Brief Description of Collateral: <input type="checkbox"/> Real Estate <input type="checkbox"/> Motor Vehicle <input type="checkbox"/> Other (Describe briefly) Amount of arrearage and other charges at time case filed included in secured claim above, if any \$ _____ <input checked="" type="checkbox"/> UNSECURED NONPRIORITY CLAIM \$ 94.58 A claim is unsecured if there is no collateral or lien on property of the debtor securing the claim or to the extent that the value of such property is less than the amount of the claim.		<input type="checkbox"/> UNSECURED PRIORITY CLAIM \$ _____ Specify the priority of the claim. <input type="checkbox"/> Wages, salaries, or commissions (up to \$2,000, earned not more than 90 days before filing of the bankruptcy petition or cessation of the debtor's business, whichever is earlier) - 11 U.S.C. § 507(a)(3) <input type="checkbox"/> Contributions to an employee benefit plan - 11 U.S.C. § 507(a)(4) <input type="checkbox"/> Up to \$900 of deposits toward purchase, lease, or rental of property or services for personal, family, or household use - 11 U.S.C. § 507(a)(6) <input type="checkbox"/> Taxes or penalties of governmental units - 11 U.S.C. § 507(a)(7) <input type="checkbox"/> Other - Specify applicable paragraph of 11 U.S.C. § 507(a) _____	
5. TOTAL AMOUNT OF CLAIM AT TIME CASE FILED: 6-1-2000 \$ <u>94.58</u> (Unsecured) \$ _____ (Secured) \$ _____ (Priority) \$ <u>94.58</u> TOTAL)			
<input type="checkbox"/> Check this box if claim includes charges in addition to the principal amount of the claim. Attach itemized statement of all additional charges.			
6. CREDITS AND SETOFFS: The amount of all payments on this claim has been credited and deducted for the purpose of making this proof of claim. In filing this claim, claimant due has deducted all amounts that claimant owes to debtor.			
7. SUPPORTING DOCUMENTS: Attach copies of supporting documents, such as promissory notes, purchase orders, invoices, itemized statements of running accounts, contracts, court judgments, or evidence of security interests. If the documents are not available, explain. If the documents are voluminous, attach a summary.			
8. TIME-STAMPED COPY: To receive an acknowledgment of the filing of your claim, enclose a stamped, self-addressed envelope and copy of this proof of claim.			
Date JUNE 27, 2000		Sign and print the name and title, if any, of the creditor or other person authorized to file this claim (attach copy of power of attorney, if any) <div style="text-align: center;">  Ken Hamilton, Collection Coordinator </div>	

Penalty for presenting fraudulent claim: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571.

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UNITED STATES BANKRUPTCY COURT

Southern District of Texas

Notice of Chapter 11 Bankruptcy Case, Meeting of Creditors, & Deadlines

A chapter 11 bankruptcy case concerning each of the debtor corporations listed below was filed on June 1, 2000

You may be a creditor of one or more of the debtor(s). **This notice lists important deadlines.** You may want to consult an attorney to protect your rights. All documents filed in the cases may be inspected at the bankruptcy clerk's office at the address listed below.

NOTE: The staff of the bankruptcy clerk's office cannot give legal advice.

See Reverse Side For Important Explanations.

Debtor (name(s), case numbers and address):

Stage Stores, Inc., a Delaware corp.; Case No. 00-35078-H2-11
Specialty Retailers, Inc., a Texas corp.; Case No. 00-35079-H2-11
Specialty Retailers, Inc. (NV), a Dallas corp.; Case No. 00-35080-H2-11
10210 Main Street
Houston, TX 77025-5229
Toll Free Number: 1-800-804-2013 (for case information)

Attorney for Debtors (name and address):

Andrew E. Jillson, Esq.
Lynnette R. Warman, Esq.
Jenkins & Gilchrist, a Professional corporation
1445 Ross Avenue, Suite 3200
Dallas, TX 75202-2799

Jointly Administered Under
Case Number 00-35078-H2-11

Taxpayer ID Nos:

76-0407711 (Stage Stores, Inc.)
74-0821900 (Specialty Retailers, Inc.)
91-1826900 (Specialty Retailers, Inc. (NV))

Attorneys for Debtors Telephone Number:

Toll Free 1-877-559-9672

Information may also be obtained from the following website:

Website address: www.stagestoresbankruptcy.com

Meeting of Creditors

Date: 7 / 11 / 00 Time: 2:00 () A.M.
(X) P.M.

Location: U.S. Courthouse
Jury Assembly Room
515 Rusk, 6th Floor
Houston, Texas 77002

Deadlines to File a Proof of Claim

Proofs of Claim must be *received* by the bankruptcy clerk's office by the following deadline:

For all creditors (except a governmental unit): 10/9/00

For a governmental unit: 11/28/00

Mail claim to: U.S. Bankruptcy Court
P.O. Box 61288
Houston, TX 77208

Creditors May Not Take Certain Actions:

The filing of the bankruptcy case automatically stays certain collection and other actions against the debtor and the debtor's property. If you attempt to collect a debt or take other action in violation of the Bankruptcy Code, you may be penalized.

Address of the Bankruptcy Clerk's Office:

515 Rusk Avenue
1st Floor
Houston, Texas 77002
Telephone number: 713/250-5115

Hours Open: 9:00 a.m. - 4:30 p.m.

For the Court

Clerk of the Bankruptcy Court:

Michael N. Miller, Clerk

Date:



Cust Code	Prem Code	Address	Status	Soft Close	Services
564974	676983	4223 45TH AMARILLO TX 79109-5499	A-N-COMMERCIAL		
		4221 45TH AMARILLO TX 79109-5499			

Off Reason: ☐

Summary	Bill Info	Collection	Service	Deposit	Contact History
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Last Bill Amount:	94.58	Acct Status:	Inactive	Pending SOs:	<input type="checkbox"/>	Life Support:	<input type="checkbox"/>
Last Bill Date:	15-JUN-2000	Established:	18-FEB-1991	Budget:	<input type="checkbox"/>	Notes:	<input type="checkbox"/>
Due Date:	26-JUN-2000	Credit Rating:	Outstanding	Pymt Arr:	<input type="checkbox"/>	Complaints:	<input type="checkbox"/>
Past Due:	94.58	Billing Cycle:	09	Bank Draft:	<input type="checkbox"/>	Master:	<input type="checkbox"/>
Acct Balance:	94.58	Next Read Date:		CoApp:	<input type="checkbox"/>	Consol Bill:	<input type="checkbox"/>
Billed Charges:	94.58	Next Bill Date:		Contract:	<input type="checkbox"/>	Energy Asst:	<input type="checkbox"/>
Payments:	0.00	Penalty Exempt:	<input type="checkbox"/> No Check:	Load Mgmt:	<input type="checkbox"/>	Loans:	<input type="checkbox"/>
Adjustments:	0.00	Bad Debt Exempt:	<input type="checkbox"/> Haz Mat:	Bad Debt:	<input type="checkbox"/>	Resp:	<input type="checkbox"/>
Discounts:	0.00	Charity:	<input type="checkbox"/>			EWQ:	<input type="checkbox"/>
Unbilled Chrg:	0.00						